| Effective October 1, 2000 P-0236 | | | | | | | | | |
|---|----------------------|--------------------------------|--------------|-------------|--|----|---------------------|------------------------|--|
| | | | | | SMALL ENTITY OTHER THAN TYPE OR SMALL ENTITY | | | | |
| TOTAL CLAIMS | 20 | | RAT | Ε | FEE | | RATE | FEE | |
| FOR | NUMBER FILED | NUMBER EXTRA | BASIC | FEE | 355.00 | OR | BASIC FEE | 710.00 | |
| TOTAL CHARGEABLE CLAIMS | 20 minus 20= | · 0 | X\$ 9 | 9= | | OR | X\$18= | _ | |
| INDEPÈNDENT CLAIMS | 4 minus 3 = 1 | | X40 |)= | | OR | X80= | 80 | |
| MULTIPLE DEPENDENT CLAIM PRESENT | | | +13 | 5= | | OR | +270= | | |
| * If the difference in column 1 is less than zero, enter "0" in column 2 | | | TOT | AL. | | OR | TOTAL | 740 | |
| 6-14-04 (Column 1) (Column 2) (Column 3) SMALL ENTITY OR SMALL ENTITY | | | | | | | | | |
| CLAIMS REMAINING AFTER AMENDMENT Total Independent L | HIGH NUM PREVI | HEST- HBER PRESENT OUSLY EXTRA | RAT | E | ADDI- TIONAL FEE | | RATE | ADDI- TIONAL FEE | |
| Total · /9 | Minus 2 | 0 = 0 | X\$: | 9= | | ОЯ | X\$18= | 0 | |
| Independent - 4 | Minus ••• | 7 = 0 | X40 |)= | 7 | OR | X80= | 0. | |
| FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM | | | +13 | 5 <u>=</u> | 1 | OR | +270= | 0 | |
| 1/12/05 | | | TO ADDIT. | OTAL FEE | / | | TOTAL | 0 | |
| (Column 1) | | ımn 2) (Column 3) HEST | <u> </u> | | 100 | | | 4001 | |
| REMAINING AFTER AMENDMENT Total • 1/2 Independent • 1/2 | NU/ PREV | MBER PRESENT EXTRA | RA | ΓE | ADDI- TIONAL FEE | | RATE | ADDI- TIONAL FEE | |
| Total · 19 | Minus | 70 = | X\$ | 9= | | OR | X\$18= | | |
| Independent • U | Minus ••• | <u> </u> | X4 |)= | | OR | X80= | | |
| FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM | | | | 5= | | OR | +270= | | |
| | | | ADDIT. | OTAL FEE | | OR | TOTAL ADDIT, FEE | 7 | |
| (Column 1) (Column 2) (Column 3) | | | | | | | | | |
| CLAIMS REMAINING | HIG NU PREV | MBER PRESENT //OUSLY EXTRA | RA | TE | ADDI- TIONAL FEE | | RATE | ADDI- TIONAL FEE | |
| Total ; | Minus •• | = | X\$ | 9= | | OR | X\$18= | | |
| AFTER AMENDMENT Total - Independent - | Minus ••• | - | X4 | 0= | | OR | X80= | | |
| FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM | | | | 5= | | OR | | | |
| * If the entry in column 1 is less than the entry in column 2, write "0" in column 3. ** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, onter "20.* | | | | OTAL | | OR | TOTAL | | |
| ** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, anter "20. ADDIT, FEE ADDIT, FEE ADDIT. FEE | | | | | | | | | |
| FORM PTO-875 Patent and Trademark Office, U.S. DEPARTMENT OF COMMERCE | | | | | | | | | |